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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M.A.P. Title Insurance, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Ann Patti
(Name of Person)

M.A.P. Title Insurance, LLC
(Firm/Company)

2005 W. Garden Street
(Address)

Pensacola, Florida 32501
(City/State and Zip Code)

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For further information concerning this matter, please call:

Mary Ann Patti at (850) 437-3700 or 850-380-6373
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

M.A.P. Title Insurance, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 10/10/06 and assigned document number L0600009900.8

SECOND: This amendment is submitted to amend the following:

Please amend the name of the company to

M.A.P. Title Insurance Agency, LLC. All

other information shall remain in effect.

If you are unable to amend the name,

please contact me at (850) 437-3700 or
(850) 380-6373. Thank you.

Dated December 11, 2006

Mary Ann Patti

Signature of a member or authorized representative of a member

Mary Ann Patti

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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